

Monday, January 11, 2021

DEPARTMENT OF JUSTICE
OFFICE OF PUBLIC AFFAIRS

Patient Recruiter Convicted in \$2.8 Million Telemedicine Scheme Against Medicare

The owner of an Orlando-area telemarketing call center was convicted for his role in a kickback scheme involving expensive genetic tests and fraudulent telemedicine services that resulted in the payment of approximately \$2.8 million in false and fraudulent claims to Medicare.

Acting Assistant Attorney General David P. Burns of the Justice Department's Criminal Division, U.S. Attorney Maria Chapa Lopez of the Middle District of Florida, Special Agent in Charge Michael F. McPherson of the FBI's Tampa Division, and Special Agent in Charge Omar Pérez Aybar of the Department of Health and Human Services – Office of Inspector General (HHS-OIG) for the Middle District of Florida, made the announcement.

Ivan Andre Scott, 34, of Kissimmee, Florida was convicted after a four-day trial of one count of conspiracy to commit health care fraud, three counts of health care fraud, one count of conspiracy to defraud the United States and pay and receive health care kickbacks, and three counts of receiving kickbacks.

According to evidence presented at trial, Scott was the owner of Scott Global, a telemarketing call center

located in Orlando. The evidence showed that Scott targeted Medicare beneficiaries with telemarketing phone calls falsely stating that Medicare covered expensive cancer screening genetic testing, or "CGx." The tests could cost as much as \$6,000 per test. After beneficiaries agreed to take the test, the evidence showed Scott paid bribes and kickbacks to telemedicine companies to obtain doctor's orders authorizing the tests.

The evidence showed that the telemedicine doctors approved the expensive testing even though they were not treating the beneficiary for cancer or symptoms of cancer, and often without even speaking with the beneficiary. According to the evidence presented at trial, Scott then sold the genetic tests and doctor's orders to laboratories in exchange for illegal kickbacks. To conceal the illegal kickbacks, Scott submitted invoices to the laboratories and other marketers making it appear as though he were being paid for hourly marketing services, rather than per referral.

Between November 2018 and May 2019, labs submitted more than \$2.8 million in claims to Medicare for genetic tests Scott referred to them, of which Medicare paid over \$880,000. In that timeframe, Scott personally received approximately \$180,000 for his role in the scheme.

The case was investigated by the HHS-OIG and the FBI and was brought as part of Operation Double Helix, a federal law enforcement action led by the Health Care Fraud Strike Force, under the supervision of the Criminal Division's Fraud Section, focused on fraudulent genetic cancer testing that has resulted in charges against dozens of defendants associated with telemedicine companies and cancer genetic testing laboratories for their alleged participation in one of the largest health care fraud schemes ever charged. Trial Attorneys Alejandro Salicrup and Jamie de Boer of the Criminal Division's Fraud Section are prosecuting the case.

SOURCE: <https://www.justice.gov/opa/pr/patient-recruiter-convicted-28-million-telemedicine-scheme-against-medicare>

INSIDE THIS ISSUE:

Inside Medicare	Pg 2
Medicare Advantage OEP	Pg 3
Innovative Tech (MCIT)	Pg 4
Volunteer Spotlight	Pg 6
Elder LGBTQ	Pg 7
Fraud in the News	Pg 8
Scams	Pg 9
FRAUD FACT FRIDAY	Pg 10
Phone Numbers/Websites	Pg 11
SMP Mission/Partners	Pg 12

INSIDE MEDICARE —

2021 Medicare Premiums and Deductibles

Source: <https://www.cms.gov/newsroom/fact-sheets/2021-medicare-parts-b-premiums-and-deductibles>

Medicare Part A Premiums/Deductibles

Medicare Part A covers inpatient hospital, skilled nursing facility, and some home health care services. About 99 percent of Medicare beneficiaries do not have a Part A premium since they have at least 40 quarters of Medicare-covered employment.

Enrollees age 65 and over who have fewer than 40 quarters of coverage and certain persons with disabilities pay a monthly premium in order to voluntarily enroll in Medicare Part A. Individuals who had at least 30 quarters of coverage or were married to someone with at least 30 quarters of coverage may buy into Part A at a reduced monthly premium rate, which will be \$259 in 2021.

Medicare Part B Premiums/Deductibles

Medicare Part B covers physician services, outpatient hospital services, certain home health services, durable medical equipment, and certain other medical and health services not covered by Medicare Part A.

Each year the Medicare premiums, deductibles, and coinsurance rates are adjusted according to the Social Security Act. For 2021, the Medicare Part B monthly premiums and the annual deductible are higher than the 2020 amounts. The standard monthly premium for Medicare Part B enrollees will be \$148.50 for 2021, an increase of \$3.90 from \$144.60 in 2020. The annual deductible for all Medicare Part B beneficiaries is \$203 in 2021.

Part A: hospital insurance

Part A premium	\$0 if you've worked 10 years or more \$259 per month if you've worked 7.5 to 10 years \$471 per month if you've worked fewer than 7.5 years
Part A hospital deductible	\$1,484 each benefit period
Part A hospital coinsurance	\$0 for the first 60 days of inpatient care each benefit period \$371 per day for days 61-90 each benefit period \$742 per lifetime reserve day after day 90 in a benefit period (You have 60 lifetime reserve days that can only be used once. They're not renewable.)
Skilled nursing facility insurance	\$0 for the first 20 days of inpatient care each benefit period \$185.50 per day for days 21-100 each benefit period

Part B: medical insurance

Part B premium (for those with incomes below \$88,000)	\$148.50 is the standard premium
Part B deductible	\$203 per year
Part B coinsurance	20% on most services Part B covers

Part D: prescription drug coverage

National average Part D premium	\$33.06 per month
Part D maximum deductible	\$445 per year
Coverage gap begins	\$4,130
Catastrophic coverage begins	\$6,550

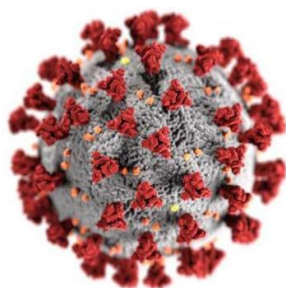
Coronavirus disease 2019 (COVID-19) VACCINE

A COVID-19 vaccine helps reduce the risk of illness from COVID-19 by working with the body's natural defenses to safely develop protection (immunity) to the virus

Medicare Part B (Medical Insurance) covers [FDA-approved COVID-19 vaccines](#).

You pay nothing for this vaccine.

Medicare also covers [COVID-19 tests](#), [COVID-19 antibody tests](#), and [COVID-19 monoclonal antibody treatments](#).



COVID-19

Things to know

Be alert for scammers. Medicare covers the vaccine at no cost to you, so if anyone asks you to share your Medicare Number or pay for access to the vaccine, you can bet it's a scam.

Here's what to know:

- You can't pay to put your name on a list to get the vaccine.
- You can't pay to get early access to a vaccine.
- Don't share your personal or financial information if someone calls, texts, or emails you promising access to the vaccine for a fee.

SOURCE: https://www.medicare.gov/coverage/coronavirus-disease-2019-covid-19-vaccine?utm_campaign=20210112_cvd_prv_gal&utm_content=english&utm_medium=email&utm_source=govdelivery

PROTECT. DETECT. REPORT.

BILLIONS OF DOLLARS are lost each year to healthcare fraud, waste and abuse, with an estimated cost of Medicare fraud alone of over \$13 billion annually.

Most Medicare and Medicaid payment errors are simple mistakes by doctors, providers, or suppliers. However, there are always a few who intentionally cheat these government programs. And who picks up the tab for healthcare fraud? As taxpayers, we ALL do.

Because senior citizens are the #1 target for healthcare fraud and scams, the goal of the Arkansas Senior Medicare Patrol (SMP) is to empower seniors,

their families, friends and caregivers, to be protective of their Medicare and personal information.

The SMP offers free educational presentations statewide about recognizing the latest scams, how to protect personal information, and how to identify and report billing errors, illegal marketing and charges for unnecessary services. We furnish free materials and tools to help.

VOLUNTEER! We need your help in combatting fraud waste and abuse. Join our team of over 100 SMP volunteers throughout the state, and receive the training you need to help empower seniors to protect and preserve the healthcare benefits they rely on.



Call or email the Arkansas SMP if you have questions, are interested in volunteering, or would like to schedule a free speaker.

VOLUNTEERS NEEDED

866-726-2916 / Kathleen.Pursell@dhs.arkansas.gov



The AR SMP program is paid for by a grant (#90MPPG0031) from the Administration for Community Living and administered through the Arkansas Department of Human Services, Division of Aging, Adult & Behavioral Health Services. Contents herein do not necessarily represent the official views of ACL.



Don't stress over the little things. You've already overcome so much in your life. You have good memories and bad ones, but the important thing is the present. Don't let the past drag you down and don't let the future frighten you. Feel good in the now. Small issues will soon be forgotten.

REPORT! Many frauds go unreported because victims may be embarrassed to report, or do not know where to report! See below for information on how to report healthcare fraud and identify theft:

IF YOU SUSPECT FRAUD OR IDENTITY THEFT:

- ◆ If you suspect Medicare fraud, immediately report it to Medicare at 800-MEDICARE at (800-633-4227) or the Health and Human Services Office of Inspector General at 800-HHS-TIPS (800-447-8477).
- ◆ To report consumer-related fraud contact the AR Attorney General Consumer Protection Division at 800-482-8982.
- ◆ To report healthcare fraud or scams call the Arkansas Senior Medicare Patrol (SMP) at 866-726-2916 or email Kathleen.Pursell@dhs.arkansas.gov.
- ◆ If you believe your identity has been stolen contact the Federal Trade Commission Identity Theft Hotline at 877-438-4338 or go to [identitytheft.gov](https://www.ftc.gov/identitytheft) to develop a recovery plan.

WE ALL HAVE TO DO OUR PART TO STOP THE SPREAD.



Wear a mask.



Wash your hands.



Watch your distance.



DHS

Medicare Advantage Open Enrollment Period (MA OEP)

- January 1 through March 31 each year
- Beneficiaries enrolled in Medicare Advantage Plans may make one change:
 - Switch between MA Plans
 - Or, switch to Original Medicare with or without Part D
- Change is effective first of the following month

Below are excerpts from **CMS NEWS**:

Today [January 12, 2021], the Centers for Medicare & Medicaid Services (CMS) issued a final rule that propels innovative technology so Medicare beneficiaries have access to the latest, most advanced devices.

The Medicare Coverage of Innovative Technology (MCIT) (CMS-3372-F) final rule **will provide the nation's more than 60 million Medicare beneficiaries access to the latest medical technology faster than ever.**

The MCIT rule will eliminate this lag time for both seniors and innovators. It will create a new, accelerated Medicare coverage pathway for innovative products that the FDA deems "breakthrough," which FDA approves on an expedited basis and could include devices harnessing new technologies like implants or gene-based tests to diagnose or treat life-threatening or irreversibly debilitating diseases or conditions like cancer and heart disease.

Under the MCIT rule, Medicare can provide national coverage simultaneously with FDA approval, up to a period of four years. After the coverage period is over, CMS will reevaluate the device based on clinical and real-world evidence of improvement in health outcomes among Medicare beneficiaries to determine more permanent coverage. This four-year timeline may incentivize the manufacturers of these breakthrough devices to develop additional evidence regarding the applicability of their products to the Medicare population, so they might continue Medicare coverage beyond the initial four years.

Importantly, because the MCIT rule will provide national Medicare coverage for four years, it will harmonize with the local coverage determination (LCD) process, thus promoting equal access for seniors regardless of where they live.

For a fact sheet on the final rule (CMS-3372-F), please visit: <https://www.cms.gov/newsroom/fact-sheets/medicare-coverage-innovative-technology-cms-3372-f>

The final rule (CMS-3372-F) can be downloaded from the Federal Register at: <https://www.federalregister.gov/public-inspection/2021-00707/medicare-program-medicare-coverage-of-innovative-technology-and-definition-of-reasonable-and>

WHO ARE WE?

The Arkansas Senior Medicare Patrol (AR SMP) is ready to provide you with the information you need to PROTECT yourself from Medicare fraud, errors, and abuse; DETECT potential fraud, errors, and abuse; and REPORT your concerns. SMPs help educate and empower Medicare beneficiaries in the fight against healthcare fraud. Your SMP can help with your questions, concerns or complaints about potential fraud issues and errors. We also provide free informational and educational presentations in your area.

AR SMP
866-726-2916

www.facebook.com/arsmp

Website: <https://humanservices.arkansas.gov/divisions-shared-services/aging-adult-behavioral-health-services/senior-medicare-fraud-patrol/>

Kathleen.Pursell@dhs.arkansas.gov

Ways to make a VA health appointment—

If you or VA canceled an appointment due to COVID-19, you can contact the VA anytime to reschedule. The fastest way to schedule an appointment is to contact your VA health care provider directly.

Here's how you can do that:

- ◆ Send a secure message to your care team. <https://www.va.gov/health-care/secure-messaging/>
- ◆ Call your care team. Find your VA health facility's phone number. <https://www.va.gov/find-locations>
- ◆ Online. You can also request some types of appointments — such as primary care and mental health — online through our VA appointments tool: <https://www.va.gov/health-care/schedule-view-va-appointments/>
- ◆ Telehealth. Consider a phone or video appointment for routine needs. Once you make a telehealth appointment, you will receive further instructions about how to join. Learn about VA Video Connect: <https://mobile.va.gov/app/va-video-connect>

**Attend SMP's
FRAUD FACT FRIDAY**
to receive the latest
fraud and scam alerts!



For more information:

Call

866-726-2916 or

Email

kathleen.pursell@dhs.arkansas.gov

How can I replace my Medicare card?

If you need to replace your card because it's damaged or lost, sign in to your [MyMedicare.gov](https://www.medicare.gov) account to print an official copy of your Medicare card. If you don't have an account, visit [MyMedicare.gov](https://www.medicare.gov) to create one.

If you need to replace your card because you think that someone else is using your number, call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

Medicare fraud

- Medicare fraud occurs when someone knowingly deceives Medicare to receive payment when they should not, or to receive higher payment than they should
- Provider is committing fraud if they:
 - Bill Medicare for services beneficiary never received
 - Bill Medicare for services that are different from the ones beneficiary received (usually more expensive)
 - Continue to bill Medicare for rented medical equipment after beneficiary has returned it
 - Offer or perform services that beneficiary does not need in order to charge Medicare for more services
 - Tell beneficiary that Medicare will pay for something when it will not
 - Use another person's Medicare number or card



Have You Heard About Pass It On?

Pass It On is an education campaign that encourages older people to help their communities recognize and report frauds and scams.

Fraudsters target people of all ages, but when older people lose money to a scam — regardless of whether it involves prizes and lotteries, imposters or identity theft — it's often more difficult for them to recoup their losses.

Pass It On is based on the idea that older adults are part of the solution, not simply the victims of scammers.

The campaign reinforces what older people already know about common scams, and gives them resources to share with family members, friends and communities.

When you hear of a scam or experience a scam first hand, PASS IT ON!

**Share what you know.
Stop Scams.**

Tell your friends and family — and you just may prevent them from becoming a victim!

Source: <https://www.consumer.ftc.gov/features/feature-0030-pass-it>

5 Tips to Deter COVID-19 Fraudsters

- Be suspicious of any unexpected callers or visitors offering COVID-19 tests or supplies. If your personal information is compromised, it may be used in other schemes.
- Do not respond to, or open hyperlinks in, text messages about COVID-19 from unknown individuals.
- Ignore offers or ads on social media sites touting COVID-19 testing or treatments.
- A physician or other trusted health care provider should assess your condition and approve a request for COVID-19 testing.
- Be aware of scammers pretending to be COVID-19 contact tracers. Legitimate contact tracers will never ask for your Medicare number or financial information.

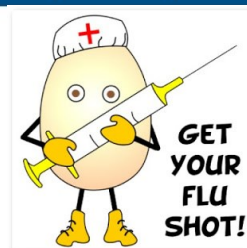
<https://www.aarp.org/money/scams-fraud/info-2020/medicare-scams-coronavirus.html>

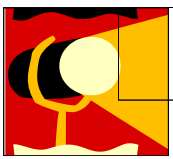
FIND ARCHIVED SMP NEWSLETTERS:

<https://humanservices.arkansas.gov/divisions-shared-services/aging-adult-behavioral-health-services/reports-publications/#smp-newsletter-archive>

Medicare.gov

The flu shot is your best protection from the flu





SMP VOLUNTEERS IN THE SPOTLIGHT!

Really Special and Valuable People!

Due to restrictions of the COVID-19 pandemic, the AR SMP was unable to hold our annual Volunteer Appreciation Luncheon this December. SMP Volunteer Coordinator, Dee Edwards, thinking outside the box, came up with the idea of a volunteer appreciation drive-by! We drove to the locations of all our volunteers statewide over a 10-day period and over 4000 miles to hand deliver certificates and tokens of appreciation to all our volunteers!

What a great time we had!
Enjoy some of the pictures from our drive-bys!
We love you and appreciate you!
Thank you for "lending a hand"!

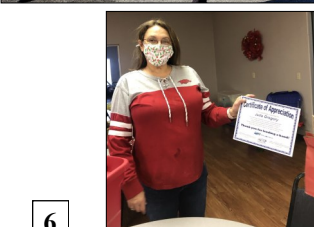
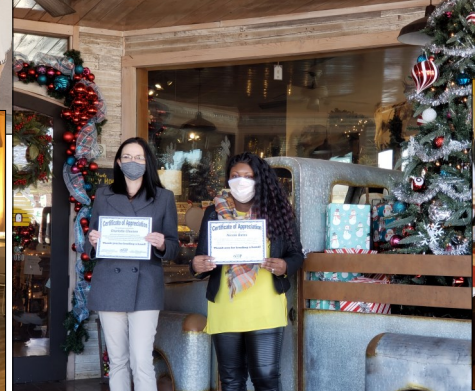
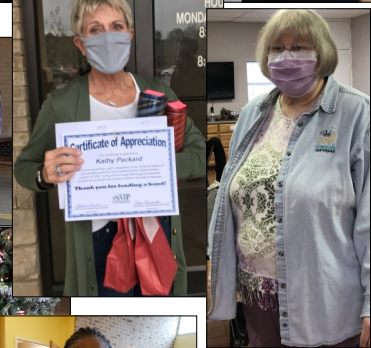
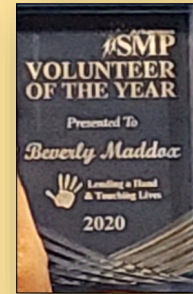
THANK YOU AND HAPPY NEW YEAR!

CONGRATULATIONS

Beverly Maddox

**VOLUNTEER
OF
THE
YEAR
2020**

We are proud of you
and we love you!
Thank you for
"Lending a Hand"



Elder LGBTQ Information

Below is a excerpt from *HEALTHY PEOPLE 2020* Topics and Objectives with a goal of improving the health, safety, and well-being of lesbian, gay, bisexual and transgender (LGBT) individuals. For the entire document, with evidence-based resources, go to: <https://www.healthypeople.gov/2020/topics-objectives/topic/lesbian-gay-bisexual-and-transgender-health>

October 8, 2020

Lesbian, Gay, Bisexual, and Transgender Health **New**

Lesbian, gay, bisexual and transgender (LGBT) individuals encompass all races and ethnicities, religions, and social classes. Sexual orientation and gender identity questions are not asked on most national or State surveys, making it difficult to estimate the number of LGBT individuals and their health needs.

Research suggests that LGBT individuals face health disparities linked to societal stigma, discrimination, and denial of their civil and human rights. Discrimination against LGBT persons has been associated with high rates of psychiatric disorders, substance abuse, and suicide. Experiences of violence and victimization are frequent for LGBT individuals and have long-lasting effects on the individual and the community. Personal, family, and social acceptance of sexual orientation and gender identity affects the mental health and personal safety of LGBT individuals.

Why Is LGBT Health Important?

Eliminating LGBT health disparities and enhancing efforts to improve LGBT health are necessary to ensure that LGBT individuals can lead long, healthy lives. The many benefits of addressing health concerns and reducing disparities include:

- Reductions in disease transmission and progression
- Increased mental and physical well-being
- Reduced health care costs
- Increased longevity

Understanding LGBT health starts with understanding the history of oppression and discrimination that these communities have faced. For example, in part because bars and clubs were often the only safe places where LGBT individuals could gather, alcohol abuse has been an ongoing problem.

HealthyPeople.gov



Social determinants affecting the health of LGBT individuals largely relate to oppression and discrimination.

Continuing Issues in LGBT Health

A number of issues will need to continue to be evaluated and addressed over the coming decade, including:

- Nationally representative data on LGBT Americans
- Prevention of violence and homicide toward the LGBT community, and especially the transgender population
- Resiliency in LGBT communities
- LGBT parenting issues throughout the life course
- Elder health and well-being
- Exploration of sexual/gender identity among youth
- Need for a LGBT wellness model
- Recognition of transgender health needs as medically necessary

For the entire document, with evidence-based resources, go to: <https://www.healthypeople.gov/2020/topics-objectives/topic/>

The Arkansas Senior Medicare Patrol (SMP) partners with Spinstervillage to assist SMP with spreading the message of Medicare fraud prevention in the Northwest Arkansas region. One way the SMP, in turn, helps spread the message of healthcare-related issues and disparities among the LGBTQ population is by inclusion in our quarterly newsletter, offering resources and information specific to the LGBTQ community.

Spinstervillage is a non-profit, women-centered organization providing community, education, and social activities. Located in Fayetteville, AR, Spinstervillage's Elder Tree house serves as a meeting space for private functions, weddings, parties, and children's events. They also maintain overnight lodging accommodations at a very reasonable rate. For more information about Spinstervillage, email: Spinstervillage@gmail.com, or go to:

- <https://nwaequality.org/programs-community-connections/spinstervillage-elder-tree/>
- <https://www.facebook.com/spinstervillageldertree/>

HOW SMPs WORK FOR YOU!

HEALTHCARE FRAUD PREVENTION AND AWARENESS—

In some cases, SMPs do more than educate. The SMPs work with Medicare recipients, their family, caregivers, and others to address questionable charges on their Medicare Summary Notices. If necessary, SMPs make referrals to outside organizations.

Here are steps SMPs recommend beneficiaries take to report concerns:

- First, call your health care provider or supplier to ask about the charge. If it was an error, ask them to correct it.

- If your provider or supplier can't answer the question, call Medicare or the insurance company that paid the bill. Their contact information can be found on your Medicare Summary Notice (MSN) or Explanation of Benefits (EOB).
- If you are not satisfied with the response you get from a provider, supplier, or insurance company, you can contact the AR SMP at 866-726-2916. We will work with the provider for you.
- The national SMP programs help beneficiaries understand the difference between suspected fraud, errors, or abuse. SMPs also assist beneficiaries in addressing suspected errors. If fraud or abuse is suspected, SMPs refer cases to the proper authorities for further investigation.

National Health Care Fraud and Opioid Takedown Results in Charges Against 345 Defendants Responsible for More than \$6 Billion in Alleged Fraud Losses **Largest Health Care Fraud and Opioid Enforcement Action in Department of Justice History**

The September 30, 2020 announcement of a historic nationwide enforcement action, involving 345 charged defendants across 51 federal districts, including more than 100 doctors, nurses and other licensed medical professionals, is the largest healthcare fraud and opioid enforcement action in the history of the Department of Justice.

These defendants have been charged with submitting more than \$6 billion in false and fraudulent claims to federal health care programs and private insurers, including more than \$4.5 billion connected to telemedicine, more than \$845 million connected to substance abuse treatment facilities, or “sober homes,” and more than \$806 million connected to other health care fraud and illegal opioid distribution schemes across the country.

SOURCE: <https://www.justice.gov/opa/pr/national-health-care-fraud-and-opioid-takedown-results-charges-against-345-defendants>

Doctor Could Get 10 Years for DME Fraud

A doctor pleaded guilty in a durable medical equipment (DME) case and also agreed to forfeit almost \$2.5 million. The case involved a scheme in which conspirators secretly gained control of multiple companies (which Medicare prohibits) and illegally purchased thousands of signed doctors’ orders for DME braces using bribes and kickbacks as incentive. This enabled them to submit high volumes of illegal DME claims amounting to more than \$20 million and resulting in more than \$10 million in payments from Medicare and the Civilian Health and Medical Program of the Department of Veterans Affairs (“CHAMPVA”).

SOURCE—DOJ: <https://www.justice.gov/usao-mdfl/pr/bocaton-doctor-pleads-guilty-20-million-health-care-fraud-scheme>.

Social Security Employees in Illinois Sentenced to Federal Court on Charges Including Bribery and Identity Theft

October 2, 2020

One female SSA employee stole identities and used the stolen information (SS and U.S. Passport information) and approved fraudulent benefit applications to ensure the individuals would qualify for the benefits, depositing the funds into accounts she controlled. She pleaded guilty to one count of aggravated ID theft, and one count of wire fraud. Sentencing was 48 months imprisonment; 3 years’ supervised release; and \$732,382 to SSA. One male SSA employee accepted \$8,400 as a bribe to provide earnings information, obtained from accessing SSA databases, to a person who owned a process server company and another company that provides consumer loans. That person used the stolen earnings information to file garnishments against those individuals.

SOURCE: https://oig.ssa.gov/newsroom/news-releases/social-security-employees-illinois-sentenced-federal-court-charges-including?utm_medium=email&utm_source=govdelivery

Justice Department Recovers Over \$2.2 Billion from False Claims Act Cases in Fiscal Year 2020

January 14, 2020

The Department of Justice obtained more than \$2.2 billion in settlements and judgments from civil cases involving fraud and false claims against the government in the fiscal year ending Sept. 30, 2020, Acting Assistant Attorney General Jeffrey Bossert Clark of the Department of Justice’s Civil Division announced today. Recoveries since 1986, when Congress substantially strengthened the civil False Claims Act, now total more than \$64 billion.

“Even in the face of a nationwide pandemic, the department’s dedicated employees continued to investigate and litigate cases involving fraud against the government and to ensure that citizens’ tax dollars are protected from abuse and are used for their intended purposes,” said Acting Assistant Attorney General Clark. “

Of the more than \$2.2 billion in settlements and judgments recovered by the Department of Justice this past fiscal year, over \$1.8 billion relates to matters that involved the health care industry, including drug and medical device manufacturers, managed care providers, hospitals, pharmacies, hospice organizations, laboratories, and physicians. The amounts included in the \$1.8 billion reflect only federal losses, and, in many of these cases, the department was instrumental in recovering additional tens of millions of dollars for state Medicaid programs.

SOURCE: <https://www.justice.gov/opa/pr/justice-department-recovers-over-22-billion-false-claims-act-cases-fiscal-year-2020#:~:text=January%2014%2C%202021-,Justice%20Department%20Recovers%20Over%20%242.2%20Billion%20from%20False,Cases%20in%20Fiscal%20Year%202020&text=Recoveries%20since%201986%2C%20when%20Congress,total%20more%20than%20%2464%20billion.>

Be aware of **SCAM(s)**:

Report all scams to the Arkansas SMP — **1-866-726-2916**



Protect Yourself

AVOID COVID-19 Vaccine Scams

As COVID-19 vaccine distribution begins, here are signs of potential scams:

- You are asked to pay out of pocket to get the vaccine.
 - You are asked to pay to put your name on a vaccine waiting list or to get early access.
 - Advertisements for vaccines through social media platforms, email, telephone calls, online, or from unsolicited/unknown sources.
 - Marketers offering to sell or ship doses of the vaccine for payment.
- ✓ **Protect Yourself. Do not give out your personal information to unknown sources.**

! If you believe you have been the victim of COVID-19 fraud, immediately report it to:

- HHS-OIG Hotline: **1-800-HHS-TIPS** | tips.hhs.gov
- FBI Hotline: **1-800-CALL-FBI** | ic3.gov
- CMS/Medicare Hotline: **1-800-MEDICARE**



For accurate, up-to-date information about COVID-19, visit:

oig.hhs.gov/coronavirus
fbi.gov/coronavirus
justice.gov/coronavirus

PROTECT YOURSELF FROM IDENTITY THEFT:

Request your free credit report from each of the three credit bureaus (Experian, Equifax and TransUnion) every 12 months at annualcreditreport.com. This will help you keep an eye out for suspicious activity.

Consider placing a fraud alert on your credit reports. This requires creditors to verify you are the one adding new or altering existing accounts. Contact any of the credit bureaus and the others will follow suit.

If you find you are a victim of identity fraud, visit identitytheft.gov for a personalized recovery plan.

For more information and to watch a video, go to:

<https://www.consumer.ftc.gov/blog/2020/10/what-do-if-someone-steals-your-identity>

STOP.

Don't wire money.

Don't pay with a prepaid debit card.

Scammers never stop looking for ways to con you! Don't give them the chance. **NEVER** give out your Medicare number over the phone to unknown or unexpected callers.

GUARD YOUR CARD!

The AR SMP has received numerous complaints about scammers calling stating that Medicare is sending new 2021 Medicare cards. **THIS IS A SCAM. Medicare is not going to send you a new Medicare card!** The caller states they are with Medicare and sometimes they tell you they are with your doctor's office—AND they have your doctor's name! Don't be fooled. Never give your Medicare number to anyone who calls you and asks for it or any other personal information!

NEW MEDICARE CARD SCAM!

Avoid Medicare phone scams



Medicare.gov



JOIN US for SMP's "FRAUD FACT FRIDAY"

Fraud Fact Fridays are 15-minute Zoom meetings, with Q & A following each meeting. These will be scheduled on various Friday's at 10 a.m. throughout each month. You will receive an invitation to attend prior to each event. You will simply click on the link to attend. It's easy!

We will use this time to inform you of the latest scams and other current Medicare topics. Most importantly, you will have the opportunity to tell us of any scams you have experienced, ask questions, and share any other Medicare-related concerns or other information with attendees.

Mark your calendars to join on Friday mornings at 10 a.m. for SMP's Fraud Fact Friday!

IF YOU ARE INTERESTED IN RECEIVING A NOTIFICATION OF THE FRAUD FACT FRIDAY ZOOM MEETINGS, PLEASE EMAIL:

Kathleen.Pursell@dhs.arkansas.gov or call 866-726-2916. We will need your email address or phone number to send you the link.

TELEMEDICINE FRAUD:

Telemedicine is a critical resource during a pandemic, but it is not immune to bad actors.

Fraud examples include:

- ◆ Misrepresentation of credentials (identification, permits, badges, qualifications, licenses)
- ◆ Medical identity theft
- ◆ Billing for services not rendered
- ◆ Offering other unnecessary tests or products, such as back braces
- ◆ Unsolicited offers for telemedicine services
- ◆ Offers of:
 - Pain creams
 - Orthotics/braces
 - Genetic testing
 - Other unrelated services



www.facebook.com/arsmp



"With ReportFraud.ftc.gov, it's quicker and easier than ever to share your story, and each report helps the FTC, and other federal, state, and local law enforcement agencies, fight fraud."

—Andrew Smith,
Director, FTC
Bureau of Consumer
Protection

The Federal Trade Commission has launched a new website, ReportFraud.ftc.gov, where consumers can easily report fraud and all other consumer issues directly to the FTC. Go to: ReportFraud.ftc.gov

REPORT SUSPECTED MEDICAID FRAUD to the AR MEDICAID INSPECTOR GENERAL (OMIG) HOTLINE
— 855-527-6644 or online at: <http://omig.arkansas.gov>

IMPORTANT PHONE NUMBERS:

AANHR—AR Advocates for Nursing Home Residents **501-607-8976**
AFMC—AR Foundation for Medical Care **1-888-354-9100**
Area Agency on Aging **1-800-986-3505**
AG—Attorney General (Consmr Prot Div) **1-800-482-8982**
AG Medicaid Fraud Hotline **1-866-810-0016**
APS—Adult Protective Services (DHS) **1-800-482-8049**
Alzheimer's Arkansas **501-224-0021**
Arkansas Rehabilitation Services **1-800-981-4463**
AR SMP (Healthcare Fraud Complaints) **1-866-726-2916**
Better Business Bureau (BBB) **501-664-7274**
CMS—(Medicare)—(Centers for Medicare and Medicaid Services)
(1-800MEDICARE) **1-800-633-4227**
Community Health Centers of AR **1-877-666-2422**
Coordination of Benefits **1-855-798-2627**
DHS (Customer Assistance Unit) **1-800-482-8988**
DHS Resource Center **1-866-801-3435**
Do Not Call Registry **1-888-382-1222**
Elder Care Locator **1-800-677-1116**
El Dorado RSVP **1-870-864-7080**
Federal Trade Commission
Report STOLEN IDENTITY **1-877-438-4338**
ICan—Increasing Capabilities Access Network **501-666-8868**
KEPRO -AR QIO(Quality Improvmt Org.) **1-844-430-9504**
LGBT Elder Hotline **888-234-SAGE**
Medicaid—(Claims Unit) **1-800-482-5431**
Medicaid Inspector General (OMIG) **1-855-527-6644**
MEDICARE (CMS 1-800MEDICARE) **1-800-633-4227**
Medicare Part D **1-877-772-3379**
Medicare Rights Center **1-800-333-4114**
Mid-Delta Community Consortium **1-870-407-9000**
Oaklawn Foundation/Center on Aging **501-623-0020**
OIG—Nat'l Medicare Fraud Hotline **1-800-HHS-TIPS**
(OIG) Office of Inspector General **1-800-447-8477**
OLTC—Office of Long Term Care **1-800-LTC-4887**
OLTC—Abuse Complaint Section **501-682-8430**
Ombudsman—State Ofc of Long Term Care **501-682-8952**
Resource Center (ADRC) **1-866-801-3435**
(DHS'S Choices in Living Resource Center)
RSVP of Central Arkansas **501-897-0793**
SHIIP (Senior Health Ins. Info Program) **1-800-224-6330**
SMP Locator—(locate an SMP outside AR) **1-877-808-2468**
SSA (Social Security Administration) **1-800-772-1213**
Little Rock Office **1-866-593-0933**
SSA Fraud Hotline **1-800-269-0271**
South Central Center on Aging **1-866-895-2795**
South East AR Center on Aging **1-870-673-8584**
Texarkana Regional Center on Aging **1-870-773-2030**
Tri-County Rural Health Network **1-870-338-8900**
UALR Senior Justice Center **501-683-7153**
UofA Cooperative Extension Service **501-671-2000**

HELPFUL WEBSITES:

ADRC—AR Aging & Disability Resource Center (DHS)—
www.choicesinliving.ar.gov/
AR Advocates for Nursing Home Residents
(AANHR)—www.aanhr.org; e-mail: Info@aanhr.org
AR Long Term Care Ombudsman Program—
www.arombudsman.com
Arkansas Aging Initiative—<http://aging.uams.edu/?id=4605&sid=6>
Arkansas Attorney General—www.arkansasag.gov
Arkansas Attorney General Consumer Protection
Division—e-mail: consumer@ag.state.ar.us
Area Agencies on Aging—www.daas.ar.gov/aaamap.html
Arkansas Foundation for Medical Care—www.afmc.org
Arkansas SMP—www.daas.ar.gov/asmp.html
BBB (Better Business Bureau)—scams and alerts—
<https://www.bbb.org/scamtracker/arkansas/>
CMS (Medicare) Centers for Medicare and Medicaid Services—
www.cms.hhs.gov
Do Not Call—www.donotcall.gov
Do Not Mail—www.DMAchoice.org
Elder Tree / Spinsterhaven—Spinsterhaven@gmail.com
Elder Care Locator—www.eldercare.gov
H.E.A.T—www.stopmedicarefraud.gov/
(Healthcare Fraud Prevention and Enforcement Action Team)
LGBT—National Resource Center on LGBT Aging
<https://www.lgbtagingcenter.org/about/updatesProcess.cfm>
MEDICAID—www.Medicaid.gov
MEDICAID INSPECTOR GENERAL (OMIG)—
<http://omig.arkansas.gov/fraud-form>
MEDICARE—www.medicare.gov
Medicare Interactive Counselor—
www.medicareinteractive.org
Hospital Compare—www.hospitalcompare.hhs.gov
MyMedicare.gov—www.mymedicare.gov
(Access to your personal Medicare claims information)
MyMedicareMatters.org (National Council on Aging)
Office of Long Term Care—[http://](http://humanservices.arkansas.gov/dms/Pages/oltcHome.aspx)
humanservices.arkansas.gov/dms/Pages/oltcHome.aspx
Office of Inspector General (OIG)—email:
HHSTips@oig.hhs.gov
Pharmaceutical Assistance Program—
medicare.gov/pap/index.asp
Physician Compare—www.medicare.gov/find-a-doctor
AR SHIIP—<https://insurance.arkansas.gov/pages/consumer-services/senior-health/>
SMP Locator—SMPResource.org (locate an SMP outside of AR)
Social Security Administration (SSA)—www.ssa.gov
SSA OIG—Report SS Fraud—<https://oig.ssa.gov/report>
TAP—www.arsinfo.org (Telecommunications Access Program)
UofA Cooperative Extension Service—www.uaex.edu



SENIOR MEDICARE PATROL (SMP) MISSION

“To empower and assist Medicare beneficiaries, their families, and caregivers to prevent, detect, and report health care fraud, error, and abuse through outreach, counseling, and education.”



TO PREVENT HEALTHCARE FRAUD—

Protect Personal Information

- * Treat Medicare/Medicaid and Social Security numbers like credit card numbers.
- * Remember, Medicare will not call or make personal visits to sell anything!
- * READ and SAVE Medicare Summary Notices (MSN) and Part D Explanation of benefits (EOB), but **shred** before discarding.

Detect Errors, Fraud, and Abuse

- * Always review MSN and EOB for mistakes.
- * Compare them with your Personal Health Care Journal.
- * Visit www.mymedicare.gov to access your personal account online to look for charges for something you did not get, billing for the same thing more than once, and services that were not ordered and/or you never received.

Report Mistakes or Questions

- * If you suspect errors, fraud, or abuse, report it immediately! Call your provider or plan **first**.
- * If you are not satisfied with their response, call the Arkansas SMP.

TO RECRUIT & TRAIN VOLUNTEERS—

- * Retired seniors;
- * Retired health-care providers; or
- * Retired professionals, *e.g.*, teachers, accountants, attorneys, investigators, nurses.

To receive the **Arkansas SMP Newsletter** electronically
email: kathleen.pursell@dhs.arkansas.gov

Current and archived newsletters available at:
<https://humanservices.arkansas.gov/divisions-shared-services/aging-adult-behavioral-health-services/reports-publications/#smp-newsletter-archive>

AR SMP PARTNERS

El Dorado Connections RSVP

El Dorado, AR
870-864-7080

RSVP of Central Arkansas

Little Rock, AR
501-897-0793

Oaklawn Center on Aging Inc.

Hot Springs, AR
501-623-0020

Spinsterhaven

Fayetteville, AR
Spinsterhaven@gmail.com

Tri County Rural Health Network

Helena, AR
870-338-8900

Texarkana Regional

Center on Aging

Texarkana, AR
870-773-2030

South Central Center on Aging

Pine Bluff, AR
870-879-1440

South East AR Educ Services Coop Foster Grandparent Program

Monticello, AR
870-367-4819

Senior Health Insurance Information Program (SHIIP)

Little Rock, AR
800-224-6330



Arkansas Senior Medicare Patrol (SMP)

P. O. Box 1437—Slot W241

Little Rock, AR 72203-1437

[FACEBOOK.COM/ARSMP](https://www.facebook.com/ARSMP)

Website: <https://humanservices.arkansas.gov/divisions-shared-services/aging-adult-behavioral-health-services/senior-medicare-fraud-patrol/>

To Report Medicare Fraud, Waste & Abuse
Call the Toll-Free **Helpline** 8:00am—4:30pm
1-866-726-2916